

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J73581

FILED
Apr 11, 2005
Secretary of State

Entity Name: TIM GALLOWAY MASONRY, INC.

Current Principal Place of Business:

1509 HIGH RIDGE ROAD
LAKE WORTH, FL 33461 US

New Principal Place of Business:

16277 DURAN BLVD. E.
LOXAHATCHEE, FL 33470 US

Current Mailing Address:

P.O BOX 3644
LANTANA, FL 33465 US

New Mailing Address:

FEI Number: 59-2802300 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALLOWAY, TIMOTHY
1509 HIGH RIDGE ROAD
LAKE WORTH, FL 33461 US

Name and Address of New Registered Agent:

GALLOWAY, TIMOTHY
16277 DURAN BLVD. E.
LOXAHATCHEE, FL 33470 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: TIM GALLOWAY

04/11/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: GALLOWAY, CONNIE
Address: 1509 HIGH RIDGE ROAD
City-St-Zip: LAKE WORTH, FL 33461

Title: P () Delete
Name: GALLOWAY, TIM
Address: 1509 HIGH RIDGE ROAD
City-St-Zip: LAKE WORTH, FL 33461

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: GALLOWAY, CONNIE
Address: 16277 DURAN BLVD. E.
City-St-Zip: LOXAHATCHEE, FL 33470

Title: P (X) Change () Addition
Name: GALLOWAY, TIM
Address: 16277 DURAN BLVD. E.
City-St-Zip: LAKE WORTH, FL 33470

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIM GALLOWAY

P

04/11/2005

Electronic Signature of Signing Officer or Director

Date